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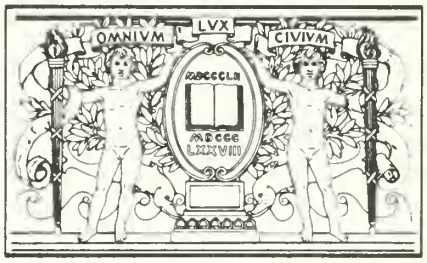

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INTERVIEWER'S NAME: _____

INTERVIEW NUMBER: _____

TYPE OF SAMPLE (CHECK ONE)

- ☐ "A"
- ☐ "B"
- ☐ "L"

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COMMUNITY NEEDS AND PRIORITIES

Sponsored by

United Community Planning Corporation

and

Combined Jewish Philanthropies

Survey Research Program

Fall/Winter 1975

Confidential: Information shall not be used or presented in any way that would permit identification of any individual or address.

IF R IS NOT COVER SHEET INFORMANT:

I am _____with the Survey Research Program of the University of Massachusetts. This study is sponsored by the United Community Planning Corporation and the Combined Jewish Philanthropies. Your participation is entirely voluntary, but it is very important in order to insure that the results accurately represent all the people in the Boston area. Your answers are strictly confidential. As we go through the interview, if there is any question you would prefer not to answer, just tell me; and we will skip it.

INTERVIEWER: CHECK ONE

TIME BEGAN: _____ AM PM

☐ R IS JEWISH (ASK A1)
☐ R IS NOT JEWISH (SKIP TO B1, pg.5)

JEWISH EDUCATION

Jewish education is one of the things in which people in the Jewish community are interested. We'd like to get your ideas.

A1. As a child, did you receive any Jewish education in a Hebrew afternoon school?

☐ YES
☐ NO (SKIP TO A3)

A2. For how many years?

_____ YEARS

A3. As a child, did you ever attend Saturday or Sunday School classes?

☐ YES
☐ NO (SKIP TO A5)

A4. For how many years?

_____ YEARS

A5. As a child, did you have any private tutoring in Jewish education?

☐ YES
☐ NO (SKIP TO A7)

A6. For how many years?

_____ YEARS

A7. As a child, did you ever attend a Jewish all day school?

☐ YES
☐ NO (SKIP TO A9)

A8. For how many years?

_____ YEARS

A9. INTERVIEWER CHECK:

R HAS CHILDREN 6-18 LIVING WITH R

☐ YES (ENTER EACH CHILD 6-18 IN CHART AND ASK A10 FOR CHILD #1, THEN #2, ETC.)
☐ NO (SKIP TO A11)

	#1	#2	#3
A10. ENTER AGE / SEX	____YRS. ☐ MALE ☐ FEMALE	____YRS. ☐ MALE ☐ FEMALE	____YRS. ☐ MALE ☐ FEMALE
a. Has (EACH CHILD) had any Jewish education?	☐ YES ☐ NO (GO TO g)	☐ YES ☐ NO (GO TO g)	☐ YES ☐ NO (GO TO g)
b. How many years of Jewish all day school has (CHILD) had?	☐ NONE _____YRS.	☐ NONE _____YRS.	☐ NONE _____YRS.
c. How about Hebrew afternoon school, how many years had (EACH CHILD) had?	☐ NONE _____YRS.	☐ NONE _____YRS.	☐ NONE _____YRS.
d. How many years of Saturday or Sunday school has (EACH CHILD) had?	☐ NONE _____YRS.	☐ NONE _____YRS.	☐ NONE _____YRS.
e. Special tutoring - how many years has (EACH CHILD) had?	☐ NONE _____YRS.	☐ NONE _____YRS.	☐ NONE _____YRS.
f. Has (EACH CHILD) had any other formal kind of Jewish education? (What kind?) (How many years?)	☐ NONE _____ _____ _____YRS.	☐ NONE _____ _____ _____YRS.	☐ NONE _____ _____ _____YRS.
g. Did (EACH CHILD) go to any camp last summer?	☐ YES ☐ NO (GO TO NEXT CHILD OR A11)	☐ YES ☐ NO (GO TO NEXT CHILD OR A11)	☐ YES ☐ NO (GO TO NEXT CHILD OR A11)
h. How many of the children at camp were Jewish- all, most, about half, or less than half?	☐ ALL ☐ MOST ☐ ABOUT HALF ☐ LESS THAN HALF	☐ ALL ☐ MOST ☐ ABOUT HALF ☐ LESS THAN HALF	☐ ALL ☐ MOST ☐ ABOUT HALF ☐ LESS THAN HALF
i. Was there any Jewish content to the program at that camp?	☐ YES ☐ NO (GO TO NEXT CHILD OR A11)	☐ YES ☐ NO (GO TO NEXT CHILD OR A11)	☐ YES ☐ NO (GO TO NEXT CHILD A11)
j. How important was that program in your choice of camp - essential, important, or not very important?	☐ ESSENTIAL ☐ IMPORTANT ☐ NOT VERY IMPORTANT (GO TO NEXT CHILD OR A11)	☐ ESSENTIAL ☐ IMPORTANT ☐ NOT VERY IMPORTANT (GO TO NEXT CHILD OR A11)	☐ ESSENTIAL ☐ IMPORTANT ☐ NOT VERY IMPORTANT (GO TO NEXT CHILD OR A11)

A11. I'm going to mention some things that many people want or expect of Jewish education. I'd like you to tell me which goals you think are essential, desirable, or not very important for a good Jewish education to accomplish.

Do you think_____ is essential, desirable, or not very important in a good Jewish education? (SHOW CARD A)

a. Teaching children the history of the Jewish people.

- ☐ ESSENTIAL
- ☐ DESIRABLE
- ☐ NOT VERY IMPORTANT

b. Teaching traditional observances.

- ☐ ESSENTIAL
- ☐ DESIRABLE
- ☐ NOT VERY IMPORTANT

c. Teaching children Jewish ethics.

- ☐ ESSENTIAL
- ☐ DESIRABLE
- ☐ NOT VERY IMPORTANT

d. Helping children to develop their own Jewish religious beliefs and principles.

- ☐ ESSENTIAL
- ☐ DESIRABLE
- ☐ NOT VERY IMPORTANT

e. Developing a strong feeling for Israel.

- ☐ ESSENTIAL
- ☐ DESIRABLE
- ☐ NOT VERY IMPORTANT

f. Teaching what it means to be Jewish in modern day society.

- ☐ ESSENTIAL
- ☐ DESIRABLE
- ☐ NOT VERY IMPORTANT

g. Strengthening the commitment to the Jewish people.

- ☐ ESSENTIAL
- ☐ DESIRABLE
- ☐ NOT VERY IMPORTANT

h. Developing familiarity with the Hebrew language.

- ☐ ESSENTIAL
- ☐ DESIRABLE
- ☐ NOT VERY IMPORTANT

A12. Which clubs or organizations do you belong to (other than a synagogue sisterhood or brotherhood)? (Any others?) (LIST IN BOX BELOW AND ASK A12a-b FOR EACH)

☐ NONE (SKIP TO A13)

a. NAME OF CLUB:			
b. Is the membership of _____ all Jewish, mostly Jewish, about half and half, or mostly NOT Jewish?	☐ ALL JEWISH ☐ MOSTLY JEWISH ☐ ABOUT HALF AND HALF ☐ MOSTLY NOT JEWISH	☐ ALL JEWISH ☐ MOSTLY JEWISH ☐ ABOUT HALF AND HALF ☐ MOSTLY NOT JEWISH	☐ ALL JEWISH ☐ MOSTLY JEWISH ☐ ABOUT HALF AND HALF ☐ MOSTLY NOT JEWISH
c. Do most members live in (CITY/TOWN) area?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO

A13. About how many of your friends are Jewish - all, most, about half, or are most of your friends not Jewish?

☐ ALL

☐ MOST

☐ ABOUT HALF

☐ MOST ARE NOT

A14. And of all your friends in the Boston area, about how many live in (TOWN/CITY/ PART OF BOSTON) - all, most, about half, or do most live somewhere else?

☐ ALL

☐ MOST

☐ ABOUT HALF

☐ MOST LIVE SOMEWHERE ELSE

A15. Do you (or does your family) belong to a Jewish Community Center?

☐ YES
☐ NO (SKIP TO B1, pg. 5)

Which one? (What is it's name?) (Where is it?)

_____

_____

_____

HEALTH

We would like to find out something about the health and medical care people are receiving.

B1. Where do you usually go when you want to see a doctor - to a clinic, hospital, doctor's office, a neighborhood health center or some other place?

(IF CLINIC- Is it a hospital outpatient clinic, a company clinic, a group of private doctors or some other kind of clinic?)

(IF HOSPITAL- Is it a hospital out-patient clinic or the emergency room?)

(IF "OTHER PLACE"- What type of place is it? (SPECIFY))

- ☐ NO USUAL PLACE (SKIP TO B3)
- ☐ DOCTOR'S OFFICE (INCLUDES GROUP PRACTICE)
- ☐ HOSPITAL OUTPATIENT CLINIC
- ☐ HOSPITAL EMERGENCY ROOM
- ☐ HARVARD COMMUNITY HEALTH PLAN (HMO)
- ☐ NEIGHBORHOOD HEALTH CENTER
- ☐ COMPANY CLINIC
- ☐ OTHER CLINIC
- ☐ OTHER PLACE (SPECIFY)

_____

_____

B2. Is there a particular doctor you usually see when you go there?

- ☐ YES
- ☐ NO

B3. INTERVIEWER: CHECK TYPE OF SAMPLE

- ☐ "A" (ASK B4)
- ☐ "B" AND R IS BLACK (ASK B4)
- ☐ "B" AND R IS JEWISH (SKIP TO C1, pg. 14)
- ☐ "L" (SKIP TO C1, pg. 14)

B4. During the past year, that is since __(DATE)____ a year ago, how many times have you visited or talked to a doctor about your health?

- ☐ NONE (ASK B5)
- _____TIMES (SKIP TO B6)

B5. When was the last time you visited or talked to a doctor about your health?

- ☐ MORE THAN ONE YEAR TO 2 YEARS
- ☐ MORE THAN 2 YEARS TO 3 YEARS
- ☐ MORE THAN 3 YEARS
- ☐ NEVER (SKIP TO B10)

B6. When was the last time you had a general physical examination - not for any illness or injury?

- ☐ ONE YEAR OR LESS
- ☐ MORE THAN ONE YEAR TO 2 YEARS
- ☐ MORE THAN 2 YEARS TO 3 YEARS
- ☐ MORE THAN 3 YEARS AGO
- ☐ NEVER

B7. When was the last time a doctor or nurse measured your blood pressure?

- ☐ ONE YEAR OR LESS
- ☐ MORE THAN ONE YEAR TO 2 YEARS
- ☐ MORE THAN 2 YEARS TO THREE YEARS
- ☐ MORE THAN 3 YEARS AGO
- ☐ NEVER

B8. When was the last time a doctor or nurse took a sample of your blood for laboratory testing?

- ☐ ONE YEAR OR LESS
- ☐ MORE THAN ONE YEAR TO 2 YEARS
- ☐ MORE THAN 2 YEARS TO THREE YEARS
- ☐ MORE THAN 3 YEARS AGO
- ☐ NEVER

B9. When was the last time you had a urine test by a doctor or nurse?

- ☐ ONE YEAR OR LESS
- ☐ MORE THAN ONE YEAR TO 2 YEARS
- ☐ MORE THAN 2 YEARS TO THREE YEARS
- ☐ MORE THAN 3 YEARS AGO
- ☐ NEVER

B10. INTERVIEWER CHECK:

- ☐ R IS FEMALE
- ☐ R IS MALE (SKIP TO B17)

B11. Have you heard of the Pap test?

- ☐ YES (SKIP TO B13)
- ☐ NO
- ☐ DON'T KNOW

(ASK B12)

B12. This is a test for one kind of cancer in women called the "Pap Test." Sometimes it is called a vaginal smear, or "Pap Smear."

The Pap test is made by taking a sample of cells from the cervix. These cells are studied in a laboratory to see whether a woman has cancer of the cervix. The test takes only a few moments, and is usually done in a doctor's office.

Have you ever heard of a test like this?

- ☐ YES
- ☐ DON'T KNOW

(SKIP TO B14)

- ☐ NO (SKIP TO B17)

B13. As you may know, the Pap test is made by taking a sample of cells from the cervix to test for cancer. The Pap test takes only a few moments.

B14. Have you ever had a Pap test?

- ☐ YES
- ☐ NO
- ☐ DON'T KNOW

(SKIP TO B17)

B15. When was the most recent one?

_____(MONTH) _____(YEAR)

B16. When was the one before that?

_____(MONTH) _____(YEAR)

B17. INTERVIEWER CHECK:

- ☐ R HAS CHILDREN 6 OR YOUNGER
- ☐ R DOES NOT HAVE CHILDREN 6 OR YOUNGER (SKIP TO B21)

B18. Where do you usually take your (CHILD/CHILDREN) when you want them to see a doctor - to a clinic, hospital, doctor's office, neighborhood health center or some other place?

(IF CLINIC- Is it a hospital outpatient clinic, a company clinic, a group of private doctors or some other kind of clinic?)

(IF HOSPITAL- Is it a hospital out-patient clinic or the emergency room?)

(IF "OTHER PLACE"- What type of place is it? (SPECIFY))

- ☐ NO USUAL PLACE (SKIP TO B20)
- ☐ DOCTOR'S OFFICE (INCLUDING GROUP PRACTICE)
- ☐ HOSPITAL OUTPATIENT CLINIC
- ☐ HOSPITAL EMERGENCY ROOM
- ☐ NEIGHBORHOOD HEALTH CENTER
- ☐ HARVARD COMMUNITY HEALTH PLAN (HMO)
- ☐ COMPANY CLINIC
- ☐ OTHER CLINIC
- ☐ OTHER PLACE (SPECIFY)

_____

_____

B19. Is there a particular doctor your (CHILD/CHILDREN) usually see there?

- ☐ YES
- ☐ NO

B20. ENTER BELOW IN CHART AGE AND SEX FROM COVER SHEET OF EACH CHILD 6 OR YOUNGER AND ASK a-e FOR EACH ONE

a. AGES & SEX	____YRS. ☐ M ☐ F	____YRS. ☐ M ☐ F	____YRS. ☐ M ☐ F
b. I'd like to find out about the shots and immunization each of your children 6 or younger has had. First, do you know how many doses of polio vaccine, if any, (EACH CHILD) has had? (Usually it is given in cube of sugar, as a drink out of a cup, or as drops.)	POLIO NUMBER_____ ☐ NONE	POLIO NUMBER_____ ☐ NONE	POLIO NUMBER_____ ☐ NONE
c. Has (EACH CHILD) had a measles vaccination?	MEASLES ☐ YES ☐ NO	MEASLES ☐ YES ☐ NO	MEASLES ☐ YES ☐ NO
d. How about mumps - has (EACH CHILD) had a vaccination for mumps?	MUMPS ☐ YES ☐ NO	MUMPS ☐ YES ☐ NO	MUMPS ☐ YES ☐ NO
e. And how about vaccinations for tetanus, diphtheria, and whooping cough- often called DPT shots. How many of these has (CHILD) had?	☐ NONE DPT NUMBER_____	☐ NONE DPT NUMBER_____	☐ NONE DPT NUMBER_____
f. Are you pretty sure (EACH CHILD) has had all the shots and vaccinations (he/she) should at this age, or are you not too sure about that?	☐ PRETTY SURE ☐ NOT TOO SURE	☐ PRETTY SURE ☐ NOT TOO SURE	☐ PRETTY SURE ☐ NOT TOO SURE

B21. INTERVIEWER CHECK:

HAS R MENTIONED NEIGHBORHOOD HEALTH CENTER?

☐ YES (SKIP TO B23)
☐ NO

B22. As you may know, neighborhood health centers have been set up in many parts of the Boston area. These centers provide general medical care. Do you know of a neighborhood health center in this area?

☐ YES
☐ NO (SKIP TO B28)

B23. From what you know, what do you think the costs at the neighborhood health center are - higher, lower, or about the same as a regular private doctor?

☐ HIGHER
☐ ABOUT THE SAME
☐ LOWER

B24. How about the quality of medical care there - is it better, not as good, or about the same as you would get most other places?

☐ BETTER
☐ ABOUT THE SAME
☐ NOT AS GOOD

B25. How easy or hard is it for you to get to the closest neighborhood health center - very easy, fairly easy, fairly hard, very hard?

☐ VERY EASY
☐ FAIRLY EASY
☐ FAIRLY HARD
☐ VERY HARD

B26. Have you or anyone living with you ever gone to the neighborhood health center for medical care?

☐ YES
☐ NO (SKIP TO B28)

B27. About how many different times have you or anyone living here gone to a neighborhood health center in the past 12 months?

_____TIMES

B28. Now I'd like to ask you a few more things about your health. First, overall how would you rate your health - excellent, very good, good, fair, poor?

- ☐ EXCELLENT
- ☐ VERY GOOD
- ☐ GOOD
- ☐ FAIR
- ☐ POOR

B29. Do you ever take tranquilizers - any kind of prescription medicine to make you calmer or more relaxed?

- ☐ YES
- ☐ NO (SKIP TO A31)

B30. About how many different days have you taken them in the last month?

_____DAYS

B31. (Other than what you mentioned) Do you yourself ever take any kind of prescription pills to help you go to sleep?

- ☐ YES
- ☐ NO (SKIP TO B33)

B32. About how many different days have you taken them in the last month?

_____DAYS

B33. Do you ever take amphetamines - they are prescription medicines that pep a person up, or sometimes help them lose weight.

- ☐ YES
- ☐ NO (SKIP TO B35)

B34. About how many different days in the last month have you taken them?

_____DAYS

B35. During an average day, how active would you say you are - very active, fairly active, or not very active?

- ☐ VERY ACTIVE
- ☐ FAIRLY ACTIVE
- ☐ NOT VERY ACTIVE

B36. Do you get any exercise such as running, taking long walks, playing tennis or basketball, bicycling, or anything like that?

- ☐ YES
- ☐ NO (SKIP TO B39)

B37. What kinds of things have you done for exercise in the last month?

_____

_____

_____

B38. About how many different days have you done any of these things in the last month?

_____DAYS

B39. Do you now weigh more than you would like to, less, or about what you would like to weigh?

- ☐ MORE
- ☐ ABOUT RIGHT } (SKIP TO B43)
- ☐ LESS

B40. How many pounds would you want to lose, if you could?

_____LBS.

B41. Do you ever watch the food you eat to try to keep your weight where you want it?

- ☐ YES
- ☐ NO

B42. Have you found a way to diet that works for you when you want to lose weight, or not?

- ☐ YES
- ☐ NO

B43. Do you smoke one or more cigarettes per day?

- ☐ YES
- ☐ NO (SKIP TO B45)

B44. About how many cigarettes do you smoke per day?

_____ (SKIP TO B47)

B45. Did you ever smoke one or more cigarettes per day?

- ☐ YES
- ☐ NO (SKIP TO B47)

B46. How long has it been since you quit?

- ☐ LESS THAN 1 YEAR
- ☐ 1 - 5 YEARS
- ☐ MORE THAN 5 YEARS AGO

B47. We are interested in how often you have any wine, beer, or cocktails - either at home or out with friends. Just look at this card and give me the letter that describes how often you have drinks of any kind. (HAND CARD B - CHECK APPROPRIATE BOX)

- ☐ a. THREE OR MORE TIMES A DAY
- ☐ b. TWO TIMES A DAY
- ☐ c. ONCE A DAY
- ☐ d. NEARLY EVERY DAY
- ☐ e. THREE OR FOUR TIMES A WEEK

- ☐ f. ONCE OR TWICE A WEEK
- ☐ g. TWO OR THREE TIMES A MONTH
- ☐ h. ABOUT ONCE A MONTH

- ☐ i. LESS THAN ONCE A MONTH BUT AT LEAST ONCE A YEAR
- ☐ j. LESS THAN ONCE A YEAR
- ☐ k. NEVER

(SKIP TO C1)

B48. Let's say a glass of wine, a bottle or can of beer or a regular cocktail is counted as one drink. Thinking of all the times you have had at least one drink recently, how often have you had_____.? (SHOW CARD C) Would you say nearly every time, more than half the time, less than half the time, once in a while, or never?

_____ MORE THAN 8 DRINKS AT ONE TIME

_____ 7 OR 8 DRINKS AT ONE TIME

_____ 5 OR 6 DRINKS AT ONE TIME

_____ 3 OR 4 DRINKS AT ONE TIME

_____ 1 OR 2 DRINKS AT ONE TIME

A. NEARLY EVERY TIME
B. MORE THAN HALF THE TIME
C. LESS THAN HALF THE TIME
D. ONCE IN A WHILE
E. NEVER

HOUSING

Now we'd like to know some things about your living situation - the things you like and the things that may be problems for you. First,

C1. How many rooms do you have in this (house/apartment)? (Do not include: baths, halls, foyers, pantries, laundries, or open porches.)

_____(NUMBER OF ROOMS)

C2. INTERVIEWER: CHECK (SEE Q.11 ON COVER SHEET)

- ☐ OWNS (SKIP TO C6)
- ☐ RENTS (ASK C3)

C3. (R RENTS) Including your rent and everything you pay for utilities--heat, electricity, and gas--about how much does this apartment cost each month? You can give me the letter next to the amount you pay altogether. (SHOW CARD D)

- ☐ a. LESS THAN $100
- ☐ b. $100 - $124
- ☐ c. $125 - $149
- ☐ d. $150 - $174
- ☐ e. $175 - $199
- ☐ f. $200 - $224
- ☐ g. $225 - $249
- ☐ h. $250 - $274
- ☐ i. $275 - $299
- ☐ j. $300 - $349
- ☐ k. $350 - $399
- ☐ l. $400 - $449
- ☐ m. $450 - $499
- ☐ n. $500 OR MORE

C4. INTERVIEWER: CHECK ONE

- ☐ R LIVES WITH UNRELATED PERSON(S)
- ☐ R LIVES WITH FAMILY ONLY
- ☐ R LIVES ALONE

(SKIP TO C8)

C5. And how much is your share? You can tell me the letter next to the amount you pay. (SHOW CARD D)

- ☐ a. LESS THAN $100
- ☐ b. $100 - $124
- ☐ c. $125 - $149
- ☐ d. $150 - $174
- ☐ e. $175 - $199
- ☐ f. $175 - $199
- ☐ g. $200 - $224
- ☐ h. $225 - $274
- ☐ i. $275 - $299
- ☐ j. $300 - $349
- ☐ k. $350 - $399
- ☐ l. $400 - $449
- ☐ m. $450 - $499
- ☐ n. $500 OR MORE

(SKIP TO C8)

C6. (R OWNS) What would you estimate your house might sell for with prices as they are now? $ _____

C7. Including your payment on your mortgage, your taxes, your home insurance, and all your utilities - heat, gas, and electricity - how much are you paying per month? (Just give me the letter next to the amount you are paying altogether.) (SHOW CARD D)

- ☐ a. LESS THAN $100
- ☐ b. $100 - $124
- ☐ c. $125 - $149
- ☐ d. $150 - $174
- ☐ e. $175 - $199
- ☐ f. $200 - $224
- ☐ g. $225 - $249
- ☐ h. $250 - $274
- ☐ i. $275 - $299
- ☐ j. $300 - $349
- ☐ k. $350 - $399
- ☐ l. $400 - $449
- ☐ m. $450 - $499
- ☐ n. $500 OR MORE

C8. Overall, how satisfied are you with this neighborhood as a place to live - would you say you are very satisfied, fairly satisfied, or not very satisfied at all?

- ☐ VERY SATISFIED
- ☐ FAIRLY SATISFIED
- ☐ NOT VERY SATISFIED

C9. Overall, how satisfied are you with this (HOUSE/APT) as a place to live - would you say very satisfied, fairly satisfied, or not very satisfied?

- ☐ VERY SATISFIED
- ☐ FAIRLY SATISFIED
- ☐ NOT VERY SATISFIED

C10. Now, I'm going to read you a list of a few things some people have said they'd like to have for their housing or where they live. I'd like you to look at this card (SHOW CARD E). The card shows a scale from 1 to 10 with "1" standing for "don't like it at all" and "10" standing for "exactly as you like it". The middle, 4, 5, or 6 would be somewhere in-between. Using this scale, how do you feel about _____ where you live?

_____ a. THE STREETS, HOW CLEAN THEY ARE

_____ b. HOW YOUR NEIGHBORS KEEP UP THEIR PROPERTY

_____ c. COST OF HOUSING

_____ d. CRIME RATE

_____ e. PUBLIC SCHOOLS ☐ DON'T KNOW

_____ f. THE AIR, HOW CLEAN IT IS

_____ g. NEARNESS OF PLAYGROUNDS & PARKS

_____ h. CONVENIENCE TO WORK ☐ NO ONE WORKS

_____ i. CONVENIENCE TO SHOPPING

_____ j. SIZE OF YOUR (APT/HOUSE)

C11. INTERVIEWER CHECK:

- ☐ RATING OF SIZE OF (APT/HOUSE) = 1-5 (ASK C12)
- ☐ RATING OF SIZE OF (APT/HOUSE) = 6-10 (SKIP TO C13)

C12. Is that because you'd like your (apartment/house) to be larger or smaller?

- ☐ LARGER
- ☐ SMALLER

C13. INTERVIEWER CHECK

- ☐ R IS JEWISH (ASK C14)
- ☐ R IS NOT JEWISH (SKIP TO C16)

C14. How many of the people who live in this neighborhood are Jewish - all, most, about half, a few or almost none?

- ☐ ALL
- ☐ MOST
- ☐ HALF
- ☐ FEW
- ☐ ALMOST NONE

C15. If you had your choice, would you like there to be more people who are Jewish in your neighborhood, less, or would you like it to be about the same as it is now?

- ☐ MORE
- ☐ ABOUT THE SAME
- ☐ LESS

C16. INTERVIEWER CHECK: TYPE OF SAMPLE

- ☐ "A" -BLACK OR SPANISH (SKIP TO D1)
- ☐ "A" -NOT BLACK OR SPANISH (ASK C17)
- ☐ "B" -SKIP TO D1, PAGE 18
- ☐ "L" -SKIP TO D1, PAGE 18

C17. We're interested in the racial composition of neighborhoods in the Boston area. Are the people in this neighborhood almost all black, mostly black, about half and half, mostly white, or almost all white?

- ☐ ALMOST ALL BLACK
- ☐ MOSTLY BLACK
- ☐ ABOUT HALF AND HALF
- ☐ MOSTLY WHITE
- ☐ ALMOST ALL WHITE

C18. Would you like more blacks in your neighborhood, fewer blacks or would you like it to be about the same as it is now?

- ☐ MORE (SKIP TO D1, PAGE 18)
- ☐ ABOUT THE SAME
- ☐ FEWER

C19. Does this make a lot of difference to you, some difference, not much difference or no difference at all?

- ☐ LOT OF DIFFERENCE
- ☐ SOME DIFFERENCE
- ☐ NOT MUCH DIFFERENCE
- ☐ NO DIFFERENCE AT ALL

JEWISH IDENTIFICATION

D1. INTERVIEWER: CHECK ONE

- ☐ R IS JEWISH
- ☐ R IS NOT JEWISH (SKIP TO E1, pg.25)

Now we'd like to ask you a few questions about how you feel about issues some people think are important to Judaism.

D2. First, for each statement, I would like you to tell me whether you tend to agree or tend to disagree - whichever is closer to how you feel.

First...

It is important to every Jewish child to be given a serious continuing Jewish education.

- ☐ AGREE
- ☐ DISAGREE

D3. Charity is the most important principle of Judaism.

- ☐ AGREE
- ☐ DISAGREE

D4. It is important to observe traditional Jewish religious practices.

- ☐ AGREE
- ☐ DISAGREE

D5. I feel proud of being a Jew when I hear or read about accomplishments of Jews.

- ☐ AGREE
- ☐ DISAGREE

D6. Being a Jew, I prefer Jews as close personal friends.

- ☐ AGREE
- ☐ DISAGREE

D7. Being a Jew, I prefer to live in a Jewish neighborhood.

- ☐ AGREE
- ☐ DISAGREE

D8. When I hear someone make a negative comment about Jews in general, I usually do not take any personal offense.

- ☐ AGREE
- ☐ DISAGREE

D9. The existence of Israel is essential for the continuation of American Jewish life.

- ☐ AGREE
- ☐ DISAGREE

D10. Being Jewish makes a difference in almost everything I do.

- ☐ AGREE
- ☐ DISAGREE

D11. If a child of yours were to consider marrying a non-Jew, how would you most likely feel about it - very negative, somewhat negative, would make no difference at all or would you feel positive about it?

- ☐ VERY NEGATIVE
- ☐ SOMEWHAT NEGATIVE
- ☐ WOULD MAKE NO DIFFERENCE AT ALL
- ☐ WOULD FEEL POSITIVE ABOUT IT

D12. If a child of yours were to consider marrying a non-Jew, which would you most likely do - strongly oppose it, discourage it, be neutral, wouldn't mind, accept it?

- ☐ STRONGLY OPPOSE
- ☐ DISCOURAGE
- ☐ NEUTRAL
- ☐ WOULDN'T MIND
- ☐ ACCEPT

D13. There are a number of concerns Jewish parents express about their child marrying a non-Jew - even those who could accept it. Tell me which of these issues, if any, would concern you.

Would you be concerned that by marrying a non-Jew_____.

a. Your child might be contributing to the decline of Jewish people.

☐ YES
☐ NO

b. You might not be close to your child and his family.

☐ YES
☐ NO

c. Your grandchildren might not be raised as Jews.

☐ YES
☐ NO

d. Your child might be rejecting Jewish principles and beliefs.

☐ YES
☐ NO

e. Your child might be rejecting you - the things you believe in and what you did as a parent.

☐ YES
☐ NO

f. Your child would be less likely to have a happy marriage.

☐ YES
☐ NO

Here are some things which are done in some Jewish households. Please tell me whether any of them are done by you or a member of your family living here.

D14. Take part in a Passover Seder?

☐ YES
☐ NO

D15. Keeping kosher at home?

☐ YES
☐ NO

D16. Recite a daily prayer or worship service - either at home or at a synagogue?

☐ YES
☐ NO

D17. Lighting Sabbath candles?

☐ YES
☐ NO

D18. Do you have a Mezzuzah on your door?

☐ YES
☐ NO

D19. Do you yourself usually fast on Yom Kippur?

☐ YES
☐ NO

D20. Do you yourself observe special dietary rules for Passover?

☐ YES
☐ NO

D21. Do you ever attend lectures or classes of Jewish interest?

☐ YES
☐ NO (SKIP TO D23)

D22. About how many sessions like this have you attended in the past year?

_____

D23. Have you ever been to Israel?

☐ YES
☐ NO (SKIP TO D25)

D24. How many times have you been there?

_____TIMES

D25. Do you yourself regularly read any newspapers or magazines of Jewish content?

☐ YES
☐ NO (SKIP TO D27)

D26. Which ones?

_____

_____

D27. Have you had any personal experience with anti-Semitism within the past few years?

- ☐ YES
- ☐ NO (SKIP TO D29)

D28. Tell me about that?

_____

_____

_____

D29. In your opinion, how much of a problem is anti-Semitism in the Boston area- extremely serious, fairly serious, moderate, or none at all?

- ☐ EXTREMELY SERIOUS
- ☐ FAIRLY SERIOUS
- ☐ MODERATE
- ☐ NONE AT ALL

D30. How about in the United States, do you think anti-Semitism in America is an extremely serious problem, fairly serious, moderate or none at all?

- ☐ EXTREMELY SERIOUS PROBLEM
- ☐ FAIRLY SERIOUS
- ☐ MODERATE
- ☐ NONE AT ALL

D31. How often do you attend religious services? (SHOW CARD F)

- ☐ A. MORE THAN ONCE A WEEK
- ☐ B. ABOUT ONCE A WEEK
- ☐ C. A FEW TIMES A MONTH
- ☐ D. EVERY FEW MONTHS
- ☐ E. ONLY ON HIGH HOLY DAYS
- ☐ F. LESS OFTEN
- ☐ G. NEVER

D32. Do you think of yourself as Orthodox, Conservative or Reform, or something else - I don't mean what you belong to, but how you consider yourself?

- ☐ ORTHODOX
- ☐ CONSERVATIVE
- ☐ REFORM
- ☐ OTHER (SPECIFY):_____

D33. What did your parents consider themselves, Orthodox, Conservative, Reform, or something else?

- ☐ ORTHODOX
- ☐ CONSERVATIVE
- ☐ REFORM
- ☐ SOMETHING ELSE (SPECIFY):_____

D34. Do you belong to a synagogue or temple?

- ☐ YES (SKIP TO D37)
- ☐ NO

D35. Did you ever belong to a synagogue or temple?

- ☐ YES
- ☐ NO (SKIP TO D40)

D36. Why is it that you no longer belong to one?

_____

_____

SKIP TO D40

D37. Which one? (IF NECESSARY: Where - Which city?)

_____

D38. Do you belong to a synagogue (brotherhood/sisterhood):

- ☐ YES
- ☐ NO

D39. Are you an officer or do you serve on any committee at your synagogue?

- ☐ YES
- ☐ NO

D40. Did you get together with any relatives to celebrate any Jewish holidays in the past year?

- ☐ YES
- ☐ NO

D41. Do you have any relatives living in the Greater Boston area (not counting those living with you)?

- ☐ YES
- ☐ NO

FAMILY

Now, I'd like to ask you a few questions about your family.

E1. INTERVIEWER: CHECK ONE

R IS MARRIED AND LIVING WITH SPOUSE

☐ YES (ASK E2)
☐ NO (SKIP TO E18)

E2. Could you tell me what month and year you and your (SPOUSE) got married?

_____(MONTH AND) 19_____(YEAR)

E3. Is this your first marriage?

☐ YES (SKIP TO E6)
☐ NO (ASK E4)

E4. How many times have you been married?

_____(TIMES)

E5. In what year were you first married?

_____(YEAR)

E6. Is this (SPOUSE'S) first marriage?

☐ YES (SKIP TO E9)
☐ NO (ASK E7)

E7. How many times has your (SPOUSE) been married?

_____(TIMES)

E8. In what year was (SPOUSE) first married?

_____(YEAR)

E9. What is (your/your wife's) date of birth?

_____ (MONTH) _____ (DAY) _____ (YEAR)

E10. INTERVIEWER: CHECK ONE

- ☐ BORN ON OR BEFORE JUNE 30, 1930 (SKIP TO E18)
- ☐ BORN ON OR AFTER JULY 1, 1930 (ASK E11)

E11. The people who are planning programs to improve cities now, and to make them good places to live in the future, are interested in the size of families people have and are planning to have.

First, how many children has (has your wife/have you) had altogether that were born alive counting any that aren't living now (or, any by a previous marriage)?

_____ (TOTAL EVER HAD-LIVING AND NOT LIVING)

E12. How many (more) children do you and your (SPOUSE) expect to have (in addition to those you already have)?

____ ADDITIONAL CHILDREN EXPECTED (SKIP TO E14)

- ☐ NONE (SKIP TO E17)
- ☐ DEPENDS (SKIP TO E14)
- ☐ "GOD'S WILL", "UP TO FATE", "DON'T KNOW" (ASK E13)

E13. Many people feel as you do and accept what comes, but still they have an idea of what is likely to happen -

As you think things will turn out for your family, how many (more) children do you think you are likely to have?

____ MORE CHILDREN

- ☐ NONE (SKIP TO E17)
- ☐ CAN'T SAY OR WON'T SAY (SKIP TO E17)

E14. When do you think you and your (SPOUSE) will probably have your (next) child-- in how many months or years?

_____(MONTHS- OR) _____(YEARS)

E15. INTERVIEWER: CHECK ONE

- ☐ EXPECTS ONLY ONE ADDITIONAL CHILD (SKIP TO E17)
- ☐ EXPECTS TWO OR MORE ADDITIONAL CHILDREN (ASK E16)

E16. How many years do you think it will be before you and your (SPOUSE) will have had all your additional children?

_____(YEARS)

E17. Most couples in the United States do something to plan the number of children they have or the time when they have them. Medical and public health people are interested in the methods commonly reported to us. Would you please look at the list and give me the letter of the method you and your (SPOUSE) usually use? If you usually use some combination of these methods, please give me all the letters. (SHOW CARD G)

- ☐ a. THE PILL
- ☐ b. RUBBER CONDOM
- ☐ c. DIAPHRAGM
- ☐ d. JELLY OR CREAM
- ☐ e. FOAM
- ☐ f. WITHDRAWAL, OR PULLING OUT
- ☐ g. INTRAUTERINE LOOP, RING OR COIL
- ☐ h. THE RHYTHM METHOD, OR SAFE PERIOD
- ☐ i. DOUCHE TO KEEP FROM GETTING PREGNANT
- ☐ j. A METHOD NOT LISTED (SPECIFY)_____
- ☐ k. NONE

_____COMBINATION
letters

E18. INTERVIEWER CHECK:

- ☐ RESPONDENT 36 YEARS OF AGE OR OLDER (SKIP TO E20)

RESPONDENT 18-35 YEARS OF AGE AND BOTH PARENTS LIVE WITH R

- ☐ YES (SKIP TO F1, PAGE 31)
- ☐ NO (COMPLETE CHART FOR PARENT(S) NOT LIVING WITH R)

E19. Now I'd like to ask you a few questions about your (parent/parents) in the home where you grew up. (ASK a THROUGH i FOR MOTHER, THEN FATHER IF NOT LIVING IN HOUSEHOLD WITH RESPONDENT.)

	MOTHER	FATHER
a. Is (PARENT) still living?	☐ YES ☐ NO (SKIP TO c)	☐ YES ☐ NO (SKIP TO c)
b. (IF LIVING) How old is your (PARENT)?	_____YRS.	_____YRS.
c. How much education did (he/she) complete?	_____ GRADE ☐ HIGH SCHOOL GRADUATION ONLY ☐ 1-3 YEARS COLLEGE ☐ COLLEGE GRADUATION ONLY ☐ MASTERS DEGREE ☐ HIGHER DEGREE (INCLUDING Ph.D., MD, LLD, DDS, ETC.)	_____ GRADE ☐ HIGH SCHOOL GRADUATION ONLY ☐ 1-3 YEARS COLLEGE ☐ COLLEGE GRADUATION ONLY ☐ MASTERS DEGREE ☐ HIGHER DEGREE (INCLUDING Ph.D., MD, LLD, DDS, ETC.
d. When you were growing up, was your (PARENT) working <u>all of the time, part of the time, or not at all</u>?	☐ ALL OF THE TIME ☐ PART OF THE TIME } (SKIP TO f) ☐ NOT AT ALL	☐ ALL OF THE TIME ☐ PART OF THE TIME } (SKIP TO f) ☐ NOT AT ALL
e. Did (he/she) ever work?	☐ YES ☐ NO (SKIP TO FATHER)	☐ YES ☐ NO (SKIP TO F1, PAGE 31)
f. What kind of work (does/did) (he/she) do on (his/her) main job? What exactly (does/did) (he/she) do?	_____ _____ _____ _____	_____ _____ _____ _____
g. What kind of business or organization (is/was) that in? (What do they do or make?)	_____ _____ _____ _____	_____ _____ _____ _____
h. (Does/Did) (he/she) work for (himself/herself)?	☐ YES ☐ NO	☐ YES ☐ NO
i. Is/was that a full-time or part-time job?	☐ FULL-TIME ☐ PART-TIME } GO TO FATHER	☐ FULL-TIME ☐ PART-TIME } GO TO F1

E20. INTERVIEWER CHECK:

- ☐ R IS 35 YEARS OF AGE OR YOUNGER (SKIP TO F1, PAGE 31)

  R IS 36 YEARS OF AGE OR OLDER AND:

- ☐ FEMALE (SKIP TO E22)
- ☐ MALE-LIVING WITH SPOUSE (ASK E21)
- ☐ MALE-WIDOWED (SKIP TO E22)
- ☐ MALE-DIVORCED, SEPARATED, NEVER MARRIED (SKIP TO F1, PAGE 31)

E21. Including any children that your wife may have had from a previous marriage, do you and your wife have any children 18-35 years of age that aren't living with you now?

- ☐ YES (SKIP TO E23)
- ☐ NO (SKIP TO F1, PAGE 31)

E22. Do you have any children 18-35 years of age that aren't living with you now?

- ☐ YES (ASK E23)
- ☐ NO (SKIP TO F1, PAGE 31)

E23. INTERVIEWER: COMPLETE CHART FOR EACH CHILD 18-35 LIVING AWAY FROM HOME

	CHILD 1	CHILD 2
a. What (are/is) the age(s) and sex of each child?, (ASK b-1 FOR CHILD 1, THEN CHILD 2, ETC.)	_____YRS. ☐ MALE ☐ FEMALE	_____YRS. ☐ MALE ☐ FEMALE
b. What is the marital status of your (CHILD) - is (he/she) married, divorced, separated, widowed, or never married?	☐ MARRIED ☐ DIVORCED ☐ SEPARATED ☐ WIDOWED ☐ NEVER MARRIED	☐ MARRIED ☐ DIVORCED ☐ SEPARATED ☐ WIDOWED ☐ NEVER MARRIED
c. How much education has (he/she) completed?	_____GRADE ☐ HIGH SCHOOL GRAD. ONLY ☐ 1-3 YRS. COLLEGE ☐ COLLEGE GRADUATION ONLY ☐ MASTERS DEGREE ☐ HIGHER DEGREE (INCLUDING Ph.D., MD, LLD, DDS, ETC.)	_____GRADE ☐ HIGH SCHOOL GRAD. ONLY ☐ 1-3 YRS. COLLEGE ☐ COLLEGE GRADUATION ONLY ☐ MASTERS DEGREE ☐ HIGHER DEGREE (INCLUDING Ph.D., MD, LLD, DDS, ETC.)
d. Is (he/she) still in school?	☐ YES (ASK e) ☐ NO (SKIP TO f)	☐ YES (ASK e) ☐ NO (SKIP TO f)
e. What degree is (he/she) studying for?	_____(DEGREE)	_____(DEGREE)
f. Is (he/she) working now?	☐ YES (SKIP TO h) ☐ NO	☐ YES (SKIP TO h) ☐ NO
g. Has (he/she) worked since (he/she) left home?	☐ YES ☐ NO (SKIP TO NEXT CHILD)	☐ YES ☐ NO (SKIP TO NEXT CHILD)
h. What kind of work (does/did) (he/she) do? (On (his/her) main job? What exactly (does/did) (he/she) do?)	_____ _____ _____ _____	_____ _____ _____ _____
i. What kind of business or organization (is/was) that in? (What do they do or make?)	_____ _____ _____	_____ _____ _____
j. (Does/Did) (he/she) work for (himself/herself)?	☐ YES ☐ NO	☐ YES ☐ NO
k. Is that a full-time or part-time job?	☐ FULL-TIME ☐ PART-TIME } GO TO NEXT CHILD	☐ FULL-TIME ☐ PART-TIME } GO TO NEXT CHILD

CHILDREN

F1. INTERVIEWER: CHECK ONE

☐ R HAS CHILD 3-17 YEARS OF AGE OR YOUNGER (COMPLETE CHART Q.F2)
☐ R DOES NOT HAVE CHILD 3-17 YEARS OF AGE OR YOUNGER THAT LIVES WITH R (SKIP TO PAGE 33)

F2. CHILD EDUCATION CHART: FILL IN AGE AND SEX OF EACH CHILD 17 YEARS OR YOUNGER LIVING WITH R

	CHILD 1	CHILD 2	CHILD 3
	____YRS. ☐ MALE ☐ FEMALE	____YRS. ☐ MALE ☐ FEMALE	____YRS. ☐ MALE ☐ FEMALE
a. Does (CHILD) go to school (including nursery school, Head-start or any other pre-school program)?	☐ YES ☐ NO (SKIP TO d)	☐ YES ☐ NO (SKIP TO d)	☐ YES ☐ NO (SKIP TO d)
b. What year of school is (CHILD) in?	☐ PRE-KINDERGARTEN ☐ KINDERGARTEN ☐ GRADE SCHOOL (WHAT GRADE?) _____ ☐ HIGH SCHOOL (WHAT YEAR?) _____	☐ PRE-KINDERGARTEN ☐ KINDERGARTEN ☐ GRADE SCHOOL (WHAT GRADE?) _____ ☐ HIGH SCHOOL (WHAT YEAR?) _____	☐ PRE-KINDERGARTEN ☐ KINDERGARTEN ☐ GRADE SCHOOL (WHAT GRADE?) _____ ☐ HIGH SCHOOL (WHAT YEAR?) _____
c. Is that a public, private, or parochial school?	☐ PUBLIC ☐ PRIVATE ☐ PAROCHIAL	☐ PUBLIC ☐ PRIVATE ☐ PAROCHIAL	☐ PUBLIC ☐ PRIVATE ☐ PAROCHIAL
d. Does (CHILD) ever use the YMCA, YWCA, settlement houses or community center other than a camp?	☐ YES ☐ NO (SKIP TO NEXT CHILD OR F3)	☐ YES ☐ NO (SKIP TO NEXT CHILD OR F3)	☐ YES ☐ NO (SKIP TO NEXT CHILD OR F3)
e. Which one does (he/she) use? (What is the name?) (Where is it?)	_____ _____ _____ _____ TOWN	_____ _____ _____ _____ TOWN	_____ _____ _____ _____ TOWN
f. Does (CHILD) go (there/to any of these) on a regular basis or just once in a while?	☐ REGULAR ☐ ONCE IN A WHILE (SKIP TO NEXT CHILD OR F3)	☐ REGULAR ☐ ONCE IN A WHILE (SKIP TO NEXT CHILD OR F3)	☐ REGULAR ☐ ONCE IN A WHILE (SKIP TO NEXT CHILD OR F3)
g. Would you say on the average (he/she) goes there more than once a week, about once a week, a few times a month, once a month or less?	☐ MORE THAN ONCE A A WEEK ☐ AT LEAST ONCE A WEEK ☐ FEW TIMES A MONTH ☐ ONCE A MONTH ☐ LESS OFTEN	☐ MORE THAN ONCE A A WEEK ☐ AT LEAST ONCE A WEEK ☐ FEW TIMES A MONTH ☐ ONCE A MONTH ☐ LESS OFTEN	☐ MORE THAN ONCE A WEEK ☐ AT LEAST ONCE A WEEK ☐ FEW TIMES A MONTH ☐ ONCE A MONTH ☐ LESS OFTEN

F3. INTERVIEWER: CHECK ONE

- ☐ R HAS AT LEAST ONE MALE CHILD 10-17 YEARS OF AGE (ASK F4)
- ☐ R HAS ONLY FEMALE CHILDREN 10-17 YEARS OF AGE (SKIP TO F7)

F4. I want you to think about the facilities in this area for boys 10 or older - such as parks, swimming pools, and gyms - as well as the programs for young people - sports, music, scouting, and other things.

F5. In general, how do you feel about the things like that available to your son(s) in (his/their) spare time - would you say they are very good, good, not so good, or not good at all?

- ☐ VERY GOOD
- ☐ GOOD
- ☐ NOT SO GOOD
- ☐ NOT GOOD AT ALL

F6. INTERVIEWER: CHECK ONE

- ☐ R HAS NO FEMALE CHILDREN 10-17 YEARS OF AGE (SKIP TO G1, PAGE 33)
- ☐ R HAS BOTH MALE AND FEMALE CHILD 10-17 YEARS OF AGE (SKIP TO F8)

F7. I want you to think about the facilities in this area for girls 10 or older such as parks, swimming pools, and gyms - as well as the programs for young people - sports, music, scouting, and other things.

F8. In general, how do you feel about the things like that available to your daughter(s) in (her/their) spare time - would you say they are very good, good, not so good, or not good at all?

- ☐ VERY GOOD
- ☐ GOOD
- ☐ NOT SO GOOD
- ☐ NOT GOOD AT ALL

SERVICES

One of the things that can be most important in a survey like this is to find out how many people actually have had different kinds of problems - whether they have gotten help. These are some kinds of problems that happen to many people from time to time. It is important for us to get this as accurate as we can, so please think about each answer carefully. Remember, your answers are completely confidential.

G1. Has there been a time in the past year when, due to illness, there was no one living here who was able to take care of the household?

- ☐ YES
- ☐ NO (SKIP TO G4)

G2. Did you talk with anyone outside your home about that problem - other than a friend or relative?

- ☐ YES (Who?)_____

_____

- ☐ NO

G3. Did you get the help you needed?

- ☐ YES
- ☐ NO

G4. Other than friends or relatives, (and WHERE R WENT), do you happen to know where a person could call or go to get help with a problem like that? (Where?)

- ☐ DON'T KNOW

_____

_____

G5. In the past year, have you (or anyone in your family here, with you) had a money problem you didn't feel you could solve yourself?

- ☐ YES
- ☐ NO (SKIP TO G8)

G6. Did you talk with anyone outside your home about that problem - other than a friend or relative?

☐ YES (Who?)_____

_____

☐ NO

G7. Did you get the help you needed?

☐ YES
☐ NO

G8. Other than friends or relatives, (and WHERE R WENT), do you happen to know where a person could call or go to get help with a problem like that? (Where?)

☐ DON'T KNOW

_____

_____

G9. In the past year, have you (or anyone in your family living here with you) needed help finding a job or deciding what kind of job would be best for (you/them)?

☐ YES
☐ NO (SKIP TO G12)

G10. Did you talk with anyone outside your home about that problem - other than a friend or relative?

☐ YES (Who?)_____

_____

☐ NO

G11. Did you get the help you needed?

☐ YES
☐ NO

G12. Other than friends or relatives, (and WHERE R WENT), do you happen to know where a person could call or go to get help like that? (Where?)

☐ DON'T KNOW

_____

_____

G13. INTERVIEWER: CHECK ONE

☐ R HAS CHILDREN AGES 3-17
☐ R HAS NO CHILDREN AGES 3-17 (SKIP TO G18)

G14. During the past year have you had a child who had a problem that worried you a lot - such as not doing well in school, a serious behavior problem or something like that?

☐ YES
☐ NO (SKIP TO G17)

G15. Did you talk with anyone outside your home about that problem - other than a friend or relative?

☐ YES (Who?)_____

_____

☐ NO

G16. Did you get the help you needed?

☐ YES
☐ NO

G17. Other than friends or relatives, (and WHERE R WENT), do you happen to know where a person could call or go to get help with a problem like that? (Where?)

☐ DON'T KNOW

_____

_____

G18. During the past year have you (or anyone in your family living here with you) had a personal, family, or marriage problem that worried you?

☐ YES
☐ NO (SKIP TO G21)

G19. Did you talk with anyone outside your home about that problem - other than a friend or relative?

☐ YES (Who?)_____

_____

☐ NO

G20. Did you get help with the problem?

☐ YES
☐ NO

G21. Other than friends or relatives, (and WHERE R WENT), do you happen to know where a person could call or go to get help with a problem like that? (Where?)

☐ DON'T KNOW

_____

_____

G22. In the past year, have you had an elderly relative who was having trouble managing to live on their own?

☐ YES
☐ NO (SKIP TO G25)

G23. Did you talk with anyone outside your home about that problem - other than a friend or relative?

☐ YES (WHO?)_____

_____

☐ NO

G24. Did you get the help you needed?

☐ YES
☐ NO

G25. Other than friends or relatives, (and WHERE R WENT), do you happen to know where a person could call or go to get help with a problem like that? (Where?)

☐ DON'T KNOW

_____

_____

G26. INTERVIEWER: CHECK TYPE OF SAMPLE

☐ "A" (ASK G27)
☐ "B" BLACK (ASK G27)
☐ "B" JEWISH (SKIP TO G36)
☐ "L" (SKIP TO G36)

G27. In the past year, have you (or anyone in your family living here with you) had a person close to you who had a problem because he or she drank too much?

☐ YES
☐ NO (SKIP TO G30)

G28. Did you talk with anyone outside your home about that problem - other than a friend or relative?

☐ YES (Who?)_____

_____

☐ NO

G29. Did you get help with the problem?

☐ YES
☐ NO

G30. Other than friends or relatives, (and WHERE R WENT), do you happen to know where a person could call or go to get help with a problem like that? (Where?)

☐ DON'T KNOW

_____

_____

G31. In the past year, have you (or anyone in your family living here with you) needed a trained nurse to come into your home to take care of someone who was very ill?

☐ YES
☐ NO (SKIP TO G34)

G32. Did you talk with anyone outside your home about that problem - other than a friend or relative?

☐ YES (Who?)_____

_____

☐ NO

G33. Did you get the help you needed?

☐ YES
☐ NO

G34. Other than friends and relatives, (and WHERE R WENT), do you happen to know where a person could call or go to get that kind of help? (Where?)

☐ DON'T KNOW

_____

_____

G35. INTERVIEWER: CHECK ONE

- ☐ R IS JEWISH
- ☐ R IS NOT JEWISH (SKIP TO H1, PAGE 39)

G36. Some services to help people in the community are connected with religious or nationality groups.

a. If you had a family or personal problem, how would you feel about getting help from a Jewish sponsored organization, would you: very much prefer it, prefer it, wouldn't mind it or would you rather get help from some other place?

SHOW CARD H

- ☐ VERY MUCH PREFER
- ☐ PREFER
- ☐ IT WOULDN'T MATTER
- ☐ WOULD RATHER GET HELP FROM SOME OTHER PLACE

b. If you needed help in finding a job, how would you feel about getting help from a Jewish sponsored organization, would you: very much prefer it, prefer it, wouldn't mind it or would you rather get help from some other place?

CARD H

- ☐ VERY MUCH PREFER
- ☐ PREFER
- ☐ IT WOULDN'T MATTER
- ☐ WOULD RATHER GET HELP FROM SOME OTHER PLACE

c. If you needed a hospital, how would you feel about a Jewish sponsored hospital, would you: very much prefer it, prefer it, wouldn't mind it or would you rather get help from some other place?

CARD H

- ☐ VERY MUCH PREFER
- ☐ PREFER
- ☐ IT WOULDN'T MATTER
- ☐ WOULD RATHER GET HELP FROM SOME OTHER PLACE

d. How about a Jewish sponsored organization for recreation for a teenager, would you: very much prefer it, prefer it, wouldn't mind it or would you rather get help from some other place?

CARD H

- ☐ VERY MUCH PREFER
- ☐ PREFER
- ☐ IT WOULDN'T MATTER
- ☐ WOULD RATHER GET HELP FROM SOME OTHER PLACE

e. And using a Jewish sponsored organization for recreation for younger children, would you: very much prefer it, prefer it, wouldn't mind it or would you rather get help from some other place?

CARD H

- ☐ VERY MUCH PREFER
- ☐ PREFER
- ☐ IT WOULDN'T MATTER
- ☐ WOULD RATHER GET HELP FROM SOME OTHER PLACE

GIVING

H1. INTERVIEWER: CHECK

☐ R IS JEWISH
☐ R IS NOT JEWISH (SKIP TO H30, PAGE 45)

Now we would like to hear some of your ideas about charitable giving.

H2. Jewish support has been given to many Jewish organizations and services, both in the United States and Israel. Which are you personally more interested in - the needs in Israel, or the work here in the American Jewish community?

☐ ISAREL
☐ AMERICA
☐ BOTH EQUALLY

H3. Suppose you had $100 to give to Jewish causes, not counting your contribution to a synagogue or temple. I'd like you to tell me how you would like it divided up between Israel and the United States.

$_____ISRAEL

$_____UNITED STATES (IF NONE: SKIP TO H5)

H4. And of the $_____for the United States, how much would you want to go for Boston area services, and how much for nation-wide Jewish causes?

$_____LOCAL

$_____NATIONAL

H5. The Combined Jewish Philantrhopies of Greater Boston is the fund-raising and planning organization for the Jewish community in this area. Are you familiar at all with the Combined Jewish Philanthropies - sometimes called CJP?

☐ YES
☐ NO (SKIP TO H15, PAGE 42)

H6. When someone gives to the Combined Jewish Philanthropies, some of the money goes to Israel, some to national Jewish causes, some to Boston area services, and some is spent on overhead expenses such as fund raising and administration. When someone gives $100 to Combined Jewish Philanthropies, how much do you think goes to Israel?

$_____

H7. And how much to national Jewish causes?

$_____

H8. And how mucn to Boston area services?

$_____

H8a. And how much to fund raising and administration?

$_____

H9. One of the things we are interested in is how people feel services are being distributed - whether some people are getting more services or help than they should from the Jewish community, while others deserve more than they are getting. For each group on this list, I'd like you to tell me if you think they are getting too much, about the right amount or not enough help from the Jewish Community. (SHOW CARD I)

Do you think_____ get too much, the right amount or not enough help from the Jewish Community?

	TOO MUCH	ABOUT RIGHT	NOT ENOUGH	DON'T KNOW
a. Elderly Jews	☐	☐	☐	☐
b. Jews in the Brookline-Newton area	☐	☐	☐	☐
c. Jews in the city of Boston	☐	☐	☐	☐
d. Jews in the outer suburbs	☐	☐	☐	☐
e. Jewish youth	☐	☐	☐	☐
f. Jewish single parent families	☐	☐	☐	☐
g. Jews with personal or family problems	☐	☐	☐	☐
h. Jewish families with children	☐	☐	☐	☐
i. Jews with high income	☐	☐	☐	☐
j. Jews with middle income	☐	☐	☐	☐
k. Jews with low income	☐	☐	☐	☐

H10. We want to ask about some other ideas you have about the Combined Jewish Philanthropies. If you feel you do not know, tell me; but if you do have ideas or impressions, we would like to hear them.

Do you think that the services supported by the Combined Jewish Philanthropies help a lot of people, some people, or only a few people in the Jewish community in the Boston area.

- ☐ A LOT
- ☐ SOME
- ☐ A FEW
- ☐ DON'T KNOW

H11. Of the services and programs the Combined Jewish Philanthropies supports, how many do you consider to be important - all, most, some, a few or almost none?

- ☐ ALL
- ☐ MOST
- ☐ SOME
- ☐ A FEW
- ☐ ALMOST NONE

H12. Thinking about the way CJP goes about raising money to support the various services, do you think CJP tries too hard to get people to give, tries about the right amount, or doesn't try hard enough?

- ☐ TRIES TOO HARD
- ☐ TRIES ABOUT RIGHT AMOUNT
- ☐ DOESN'T TRY HARD ENOUGH
- ☐ DON'T KNOW

H13. When decisions are made about how CJP money is spent, do you think it represents the interests of only a few people in the Jewish community or represents the broader interest of many people?

- ☐ FEW PEOPLE
- ☐ MANY PEOPLE
- ☐ DON'T KNOW

H14. How easy would it be for a person like you to have a say in how CJP money should be spent - very easy, fairly easy, fairly hard, or very hard?

- ☐ VERY EASY
- ☐ FAIRLY EASY
- ☐ FAIRLY HARD
- ☐ VERY HARD
- ☐ DON'T KNOW

H15. One of the questions that we are concerned about is what kind of services people feel are most important to be supported or sponsored by the Jewish community - in addition to services provided by the general community. I'm going to read you a list of services that are now supported, in part, by charities. I want you to tell me how you would like money you might give to the Combined Jewish Philanthropies to be spent. For each, tell me if that service is very important, important, or not too important for CJP to sponsor or support. (SHOW CARD J)

How important is it to you to have CJP support or sponsor _____.

	VERY IMPORTANT	IMPORTANT	NOT TOO IMPORTANT
a. Day care programs during the day or after school for children whose parents have to work.	☐	☐	☐
b. Special health programs for people who are disabled, handicapped, or retarded.	☐	☐	☐
c. Counseling for individuals or married couples who have family or personal problems.	☐	☐	☐
d. Emergency food, clothing and other kinds of help for people caught in crises?	☐	☐	☐
e. Employment service: helping people who have trouble finding jobs to find work.	☐	☐	☐
f. Homemaker service - providing help in taking care of the home in times of sickness.	☐	☐	☐
g. Sports, recreation and other programs for young people.	☐	☐	☐
h. Sports, recreation and other programs for adults.	☐	☐	☐
i. Programs to help with problems like drug addiction or alcoholism.	☐	☐	☐
j. Information and referral services- having a place where people with various problems can find out where to go for help.	☐	☐	☐

H15. How important is it to you to have CJP support or sponsor_____.
(cont.)

	VERY IMPORTANT	IMPORTANT	NOT TOO IMPORTANT
k. Jewish education	☐	☐	☐
l. Hospitals	☐	☐	☐
m. Homes for the aged and nursing homes.	☐	☐	☐
n. Other special housing for older Jews.	☐	☐	☐
o. Adult education and cultural programs.	☐	☐	☐
p. Golden Age Programs for senior citizens.	☐	☐	☐

H16. Over the past 12 months approximately how much did you and other members of your family give altogether to various charities (not counting what you gave to a synagogue or temple). (SHOW CARD K)

a. ☐ UNDER $10
b. ☐ $10 - $24
c. ☐ $25 - $49
d. ☐ $50 - $99

e. ☐ $100 - $149
f. ☐ $150 - $199
g. ☐ $200 - $299
h. ☐ $300 - $499

i. ☐ $500 - $749
j. ☐ $750 - $999
k. ☐ $1,000 - $1,999
l. ☐ $2,000 AND OVER

H17. About how much of this was to Jewish causes (not counting what you gave to synagogues)? (SHOW CARD K)

a. ☐ UNDER $10
b. ☐ $10 - $24
c. ☐ $25 - $49
d. ☐ $50 - $99

e. ☐ $100 - $149
f. ☐ $150 - $199
g. ☐ $200 - $299
h. ☐ $300 - $499

i. ☐ $500 - $749
j. ☐ $750 - $999
k. ☐ $1,000 - $1,999
l. ☐ $2,000 AND OVER

H18. Altogether, counting contributions and dues and so on, about how much have you and your family contributed to a temple or synagogue this past year?

$_____

H19. Do you think that Jews should give more to Jewish or more to general community causes, or the same to both?

- ☐ MORE TO JEWISH
- ☐ MORE TO GENERAL
- ☐ SAME

H20. Did you give to the Combined Jewish Philanthropies in the last year?

- ☐ YES
- ☐ NO

H21. Did you buy any Israel Bonds in the last year?

- ☐ YES
- ☐ NO

H22. How does the amount of money you gave to Jewish causes last year compare with the amount you gave five years ago - is it more, less, or about the same?

- ☐ MORE
- ☐ SAME (SKIP TO H24)
- ☐ LESS

H23. What is the main reason you now give (more/less)?

_____

_____

_____

H24. Considering everything you contributed to all charities of all kinds this year, is it more, less, or about the same as you gave five years ago?

- ☐ MORE
- ☐ SAME (SKIP TO H26)
- ☐ LESS

H25. What is the main reason you now give (more/less)?

_____

_____

_____

H26. Have you ever heard of the United Way here in the Greater Boston area? It used to be known as the United Fund or Red Feather and supports a large number of charitable services.

- ☐ YES
- ☐ NO (SKIP TO I1, PAGE 50)

H27. Did you give to the United Way (or United Fund) in the past year?

- ☐ YES
- ☐ NO

H28. We have just a couple of other questions about the United Way. If you don't know, just tell me; but we would like to get any ideas or impressions you have.

Do you think that the services of the United Way help a lot of people, some people, or only a few people?

- ☐ LOT
- ☐ SOME
- ☐ FEW
- ☐ DON'T KNOW

H29. Of the services the United Way supports, how many do you consider to be important - all, most, some, a few or almost none?

- ☐ ALL
- ☐ MOST
- ☐ SOME
- ☐ FEW
- ☐ ALMOST NONE
- ☐ DON'T KNOW

H30. INTERVIEWER: CHECK

- ☐ R IS JEWISH (SKIP TO I1, PAGE 50)
- ☐ R IS NOT JEWISH (ASK H31)

H31. One of the things we are interested in is how people feel services are being distributed by charities, government agencies and others that provide services - whether some people are getting more services or help than they should, while others deserve more than they are getting. For each group on this list, I'd like you to tell me if you think they are getting too much, about the right amount or not enough. (SHOW CARD I)

Do you think in general that _____ get too much, about the right amount, or not enough help and service?

	TOO MUCH	ABOUT RIGHT	NOT ENOUGH	DON'T KNOW
a. People 65 or older	☐	☐	☐	☐
b. Teen-agers	☐	☐	☐	☐
c. Grade school children	☐	☐	☐	☐
d. Pre-school children	☐	☐	☐	☐
e. Young adults	☐	☐	☐	☐
f. People with personal or family problems	☐	☐	☐	☐
g. People in suburbs outside of Boston	☐	☐	☐	☐
h. People who live in the city of Boston	☐	☐	☐	☐
i. Black families	☐	☐	☐	☐
j. Spanish families	☐	☐	☐	☐
k. White families	☐	☐	☐	☐
l. Families with children	☐	☐	☐	☐
m. People with middle incomes	☐	☐	☐	☐
n. People with high incomes	☐	☐	☐	☐
o. People with low incomes	☐	☐	☐	☐

H32. Have you ever heard of the United Way here in the Greater Boston area? It used to be known as the United Fund or Red Feather and supports a large number of charitable services.

- ☐ YES
- ☐ NO (SKIP TO H38)

We want to ask about some ideas you have about the United Way. If you feel you do not know, tell me; but if you do have ideas or impressions, we would like to hear them.

H33. Do you think that the services of the United Way help a lot of people, some people, or only a few people?

- ☐ LOT
- ☐ SOME
- ☐ FEW

H34. Of the services the United Way supports, how many do you consider to be important - a lot, some, a few or not very many?

- ☐ LOT
- ☐ SOME
- ☐ FEW
- ☐ NOT VERY MANY

H35. Thinking about the way the United Way goes about raising money to support various services, do you think it tries too hard to get people to give, tries about the right amount, or doesn't try hard enough?

- ☐ TRIES TOO HARD
- ☐ TRIES ABOUT RIGHT AMOUNT
- ☐ DOESN'T TRY HARD ENOUGH

H36. When decisions are made about how the money is spent do you think it represents the interests of only a few people or represents the broader interest of many people?

- ☐ FEW
- ☐ MANY

H37. How easy would it be for a person like you to have a say in how United Way money should be spent - very easy, fairly easy, fairly hard or very hard?

- ☐ VERY EASY
- ☐ FAIRLY EASY
- ☐ FAIRLY HARD
- ☐ VERY HARD

H38. One of the questions that we are concerned about is what kind of services people feel are most important. I'm going to read you a list of services that are now supported, in part, by the United Way. I want you to tell me how you would like money you might give to the United Way to be spent. For each, tell me if that service is very important, important, or not too important. (SHOW CARD J)

How important is it to you to have the United Way support _____.

	VERY IMPORTANT	IMPORTANT	NOT TOO IMPORTANT
a. Adoption services - to find homes for children and help people who want to adopt children.	☐	☐	☐
b. Day care programs during the day or after school for children whose parents have to work.	☐	☐	☐
c. Special health programs for people who are disabled, handicapped, or retarded.	☐	☐	☐
d. Counseling for individuals or married couples who have family or personal problems.	☐	☐	☐
e. Legal services, providing the help of a lawyer for those who cannot afford to pay for a lawyer when they need one.	☐	☐	☐
f. Emergency food, clothing and other kinds of help for people caught in fires, floods or other disasters.	☐	☐	☐
g. Employment service: helping people who have trouble finding jobs to find work.	☐	☐	☐
h. Homemaker service - providing help in taking care of the home in times of sickness.	☐	☐	☐
i. Helping citizen groups to work on neighborhood problems.	☐	☐	☐
j. Sports, recreation and other programs for young people.	☐	☐	☐
k. Sports, recreation and other programs for adults.	☐	☐	☐

H38. How important is it to you to have the United Way support_____.
(cont.)

	VERY IMPORTANT	IMPORTANT	NOT TOO IMPORTANT
l. Programs to help with special health problems like drug addiction or alcoholism.	☐	☐	☐
m. Information and referral services - having a place where people with various problems can find out where to go for help.	☐	☐	☐
n. Visiting nurses who will help take care of a person who is ill at home.	☐	☐	☐
o. Planning - making sure the services people need are available and that money is spent on the most needed services.	☐	☐	☐
p. Medical research - designed to find out the causes and cures of different illnesses and diseases.	☐	☐	☐

H39. Approximately how much did you and other members of your family here give altogether to various charities over the past 12 months. (SHOW CARD K)

a. ☐ UNDER $10
b. ☐ $10 - $24
c. ☐ $25 - $49
d. ☐ $50 - $99

e. ☐ $100 - $149
f. ☐ $150 - $199
g. ☐ $200 - $299
h. ☐ $300 - $499

i. ☐ $500 - $749
j. ☐ $750 - $999
k. ☐ $1,000 - $1,999
l. ☐ $2,000 AND OVER

H40. Considering everything you contributed to all charities of all kinds this year, is it more, less, or about the same as you gave five years ago?

☐ MORE
☐ SAME (SKIP TO H42)
☐ LESS

H41. What is the main reason you now give (more/less)?

_____

_____

H42. Did you give to the United Way (or United Fund) in the past year?

☐ YES
☐ NO

FAMILY BACKGROUND

I1. INTERVIEWER: CHECK ONE

- ☐ R IS BLACK (NOT OF SPANISH ORIGIN) (SKIP TO I10 PAGE 52)
- ☐ R IS NOT BLACK

I2. We're also interested in people's family backgrounds. First, could you tell me where you were born?

_____

(IF U.S. - CITY OR TOWN AND STATE: IF FOREIGN - COUNTRY)

I3. INTERVIEWER: CHECK ONE

R WAS BORN:

- ☐ IN U.S. OR CANADA (ASK I4)
- ☐ ELSEWHERE (SKIP TO I10)

I4. Do you know what country your family came from on your father's side? (Which country?)

_____

I5. And which generation was that - your father, your grandfather, or earlier.

- ☐ FATHER
- ☐ GRANDFATHER
- ☐ EARLIER THAN GRANDFATHER

I6. And which country did your family come from on your mother's side?

_____

I7. Which generation was that - your mother, your grandfather, or earlier?

- ☐ MOTHER
- ☐ GRANDFATHER
- ☐ EARLIER THAN GRANDFATHER

I8. INTERVIEWER: CHECK

- ☐ R NOT BORN IN USA OR CANADA
- ☐ R HAS SINGLE NATIONAL BACKGROUND (OTHER THAN CANADIAN)
- ☐ R IS JEWISH

} (SKIP TO I10)

- ☐ R HAS MIXED NATIONAL BACKGROUND (ASK I9)

I9. Of course we may all think of ourselves as Americans, but Americans have different national backgrounds.

Which nationality do you think of yourself as?

_____

I10. INTERVIEWER: ENTER FROM COVER SHEET AGE AND SEX OF EVERYONE IN HOUSEHOLD 18 YEARS OR OLDER. THEN ASK a - n FOR EACH PERSON

a. RELATIONSHIP TO RESPONDENT	RESPONDENT		
b. AGE AND SEX	____YRS. ☐ MALE ☐ FEMALE	____YRS. ☐ MALE ☐ FEMALE	____YRS. ☐ MALE ☐ FEMALE
c. How much education has (PERSON) had? (IF "HIGH SCHOOL" or COLLEGE: Did (PERSON) graduate?)	☐ 8 GRADES OR LESS ☐ 1 TO 3 YRS. HIGH SCHOOL ☐ HIGH SCHOOL GRADUATION ☐ 1 TO 3 YRS. COLLEGE ☐ COLLEGE GRADUATION ☐ MASTERS LEVEL ☐ HIGHER DEGREE	☐ 8 GRADES OR LESS ☐ 1 TO 3 YRS. HIGH SCHOOL ☐ HIGH SCHOOL GRADUATION ☐ 1 TO 3 YRS. COLLEGE ☐ COLLEGE GRADUATION ☐ MASTERS LEVEL ☐ HIGHER DEGREE	☐ 8 GRADES OR LESS ☐ 1 TO 3 YRS. HIGH SCHOOL ☐ HIGH SCHOOL GRADUATION ☐ 1 TO 3 YRS. COLLE ☐ COLLEGE GRADUATIO ☐ MASTERS LEVEL ☐ HIGHER DEGREE
d. Is (PERSON) working now, unemployed, laid off, retired, keeping house, or a student?	☐ WORKING NOW (SKIP TO g) ☐ UNEMPLOYED ☐ LAID OFF ☐ RETIRED ☐ STUDENT ☐ KEEPING HOUSE (ASK e)	☐ WORKING NOW (SKIP TO g) ☐ UNEMPLOYED ☐ LAID OFF ☐ RETIRED ☐ STUDENT ☐ KEEPING HOUSE (ASK e)	☐ WORKING NOW (SKIP TO g) ☐ UNEMPLOYED ☐ LAID OFF ☐ RETIRED ☐ STUDENT ☐ KEEPING HOUSE (AS e)
e. Has (PERSON) looked for a job during the past 4 weeks?	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
f. Was (PERSON) employed at all during the past year?	☐ YES ☐ NO (SKIP TO k)	☐ YES ☐ NO (SKIP TO k)	☐ YES ☐ NO (SKIP TO k)
g. How many hours a week (does/did) (PERSON) usually work on his main job?	____HRS. PER WEEK	____HRS. PER WEEK	____HRS. PER WEE
h. How many months, (if any), has (PERSON) been out of work in the past year? Not counting paid vacation or sick leave.	☐ NONE (SKIP TO 1) ____MONTHS	☐ NONE (SKIP TO 1) ____MONTHS	☐ NONE (SKIP TO 1) ____MONTHS
i. Why was that?	_____ _____ _____	_____ _____ _____	_____ _____ _____

. Did (PERSON) look for another job during that time?	☐ YES ☐ NO (SKIP TO 1)	☐ YES ☐ NO (SKIP TO 1)	☐ YES ☐ NO (SKIP TO 1)
. Has (PERSON) ever worked?	☐ YES ☐ NO (GO TO NEXT PERSON OR I11)	☐ YES ☐ NO (GO TO NEXT PERSON OR I11)	☐ YES ☐ NO (GO TO NEXT PERSON OR I11)
What kind of work (does/did) (PERSON) do (on his main job)? (What exactly does he do on his job?)	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____
What kind of business or organization (is/was) that in? (What do they do or make?)	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____
(Does/Did) (PERSON) work for himself, someone else, or what?	☐ SELF ☐ SOMEONE ELSE ☐ OTHER (EXPLAIN): _____ _____ (GO TO NEXT PERSON OR I11)	☐ SELF ☐ SOMEONE ELSE ☐ OTHER (EXPLAIN): _____ _____ (GO TO NEXT PERSON OR I11)	☐ SELF ☐ SOMEONE ELSE ☐ OTHER (EXPLAIN): _____ _____ (GO TO NEXT PERSON I11)

I11. INTERVIEWER: CHECK

SAMPLE

☐ "A"
☐ "B" - Black } (GO TO I12)

☐ "B" - Jewish
☐ "L" } (SKIP TO I23)

I12. INTERVIEWER: CHECK

RESPONDENT IS:

☐ EMPLOYED (ASK I13)

NOT EMPLOYED AND:

☐ 65 OR OLDER (SKIP TO I23)
☐ UNDER 65 (SKIP TO I16)

I13. Where is your work located? (What city or town? IF BOSTON: What part of Boston?)

_____

_____

☐ WORKS AT HOME (SKIP TO I19)

I14. How do you usually get to work - by car, MBTA, train, or what?

☐ CAR
☐ MBTA
☐ TRAIN
☐ TAXI
☐ WALK
☐ OTHER (SPECIFY):_____

I15. How long does it usually take you to get to work?

_____(SKIP TO I19)

I16. Is the main reason you are not working outside your home because you are not interested, you haven't found a job you want, (you have to take care of your children) or some other reason?

☐ NOT INTERESTED (SKIP TO I19)
☐ HAVEN'T FOUND JOB YOU WANT (SKIP TO I18)
☐ TAKE CARE OF CHILD (ASK I17)
☐ OTHER (WHAT?):_____

_____(SKIP TO I19)

I17. If good arrangements could be made to take care of your children, would you be interested in having a job outside your home, or not?

☐ INTERESTED
☐ NOT INTERESTED (SKIP TO I19)

I18. (If you were to look for a job) Do you feel you have the skills and experience you need to get a good job, or would you need some more training to get a job you'd want?

☐ HAVE SKILLS
☐ NEED TRAINING

I19. INTERVIEWER: CHECK

RESPONDENT HAS CHILD 13 OR YOUNGER

☐ YES
☐ NO (SKIP TO I23)

I20. INTERVIEWER: CHECK

CHILD(REN)'S MOTHER IS WORKING NOW:

☐ YES
☐ NO (SKIP TO I23)

I21. What kind of arrangement do you make to take care of your (child/children) while your mother is at work? (Do you pay_____for taking care of your child(ren)?

_____

_____

_____

PAY: ☐ YES
☐ NO

I22. How satisfied are you with this arrangement - very satisfied, somewhat satisfied, not very satisfied, not at all satisfied?

☐ VERY SATISFIED
☐ SOMEWHAT SATISFIED
☐ NOT VERY SATISFIED
☐ NOT AT ALL SATISFIED

I23. Please look at this list and tell me if you (or anyone in your family living with you) had any income in 1975 that came to $500 or more from any of these sources: Please think carefully about each one. Income is a personal subject, but it is important in understanding people's situation. Let me assure you again this is completely confidential.

Did you or anyone in your family here have any income of $500 or more from $_____?

YES	NO	
☐	☐	Social Security
☐	☐	Unemployment Compensation
☐	☐	Disability or Veterans Benefits
☐	☐	Benefits from GI Bill
☐	☐	Rents
☐	☐	Welfare Including AFDC
☐	☐	Interest or Dividends from Stocks, Bonds, or Savings
☐	☐	SSI (Supplementary Security Income)
☐	☐	Alimony from a Previous Marriage
☐	☐	Child Support from Previous Marriage
☐	☐	Food Stamps
☐	☐	Pension or Annuity
☐	☐	Sale of any Personal Property or Stocks
☐	☐	Help from any Friends or Relatives Not Living With You

I24. Was there any other source of income that amounted to as much as $500 during the past year?

☐ YES (What?)_____

_____

☐ NO

I25. Knowing income is very important to this project, it is important in understanding the answers people give to other questions. We can assure you of complete confidentiality, and we ask that you answer just as accurately as you can. Please look at this card (SHOW CARD L). You can give me the letter of your best estimate of your (and your family's) 1975 income before taxes.

☐ a. UNDER $1,000
☐ b. $1,000 TO $1,999
☐ c. $2,000 TO $2,999
☐ d. $3,000 TO $3,999
☐ e. $4,000 TO $4,999

☐ f. $5,000 TO $5,999
☐ g. $6,000 TO $6,999
☐ h. $7,000 TO $7,999
☐ i. $8,000 TO $8,999
☐ j. $9,000 TO $9,999

☐ k. $10,000 TO $14,999
☐ l. $15,000 TO $19,999
☐ m. $20,000 TO $24,999
☐ n. $25,000 TO $29,999
☐ o. $30,000 TO $34,999

☐ p. $35,000 TO $39,999
☐ q. $40,000 TO $44,999
☐ r. $45,000 TO $49,999
☐ s. $50,000 OR MORE

I26. Do you have any money put away in savings or invested - that you could use if you really needed it?

☐ YES (ASK I27)
☐ NO (SKIP TO I28)

I27. About how much do you have saved or invested all together? You can me the letter next to the amount. (SHOW CARD M)

- ☐ a. LESS THAN $1,000
- ☐ b. $1,000 TO $4,999
- ☐ c. $5,000 TO $9,999
- ☐ d. $10,000 OR MORE

I28. There is a lot of talk about the cost of living these days. How hard is it for you to make ends meet - would you say it is very hard, pretty hard, not too hard, or not hard at all?

- ☐ VERY HARD
- ☐ PRETTY HARD

} (ASK I29)

- ☐ NOT TOO HARD
- ☐ NOT HARD AT ALL

} (SKIP TO I30)

I29. Has there been a time during the past year that things were so hard that you were unable to pay your rent or mortgage within one month of the time it was due?

- ☐ YES
- ☐ NO

I30. And finally, one last thing. If you were to pick one problem in the Boston area that is most important for groups like the United Way (or the Combined Jewish Philanthropies) to work on, what would it be?

_____

_____

_____

I31. By the way, have you ever been interviewed in a sample survey like this before?

- ☐ YES
- ☐ NO

INTERVIEWER CHECK:

I32. IS THERE DIVORCED OR SEPARATED FEMALE WITH CHILD UNDER 18 IN HOUSEHOLD?

- ☐ YES
- ☐ NO (TERMINATE)

INTERVIEWER CHECK:

I33. IS (PERSON) CURRENTLY RECEIVING WELFARE OR AFDC PAYMENTS?

☐ YES (TERMINATE)
☐ NO

I34. Has (PERSON) received any welfare or AFDC payments since her (separation/divorce)?

☐ YES
☐ NO (TERMINATE)

A researcher at Harvard is particularly interested in the problems and needs of one-parent families. Your cooperation is entirely voluntary, but if you are willing to be contacted by the researcher to discuss that study further, I would like to have your telephone number so that she can call you. Your discussion with her will, of course, also be strictly confidential.

_____
Telephone Number

Time Ended:_____

(INTERVIEWER: THIS SECTION BY OBSERVATION)

INTERVIEWER JUDGMENT:

1. R'S MORALE

- ☐ EXCELLENT
- ☐ VERY GOOD
- ☐ GOOD
- ☐ FAIR
- ☐ POOR

2. R'S COOPERATIVENESS TOWARDS THE INTERVIEW

- ☐ COOPERATIVE
- ☐ NEUTRAL
- ☐ ANTAGONISTIC

3. R'S FEELING ABOUT THE INTERVIEW

- ☐ VERY INTERESTED
- ☐ INTERESTED
- ☐ INDIFFERENT
- ☐ NEGATIVE, DEFENSIVE, UPSET

4. TYPE OF STRUCTURE IN WHICH RESPONDENT LIVES?

- ☐ DETACHED SINGLE FAMILY HOUSE
- ☐ APARTMENT IN A PARTLY COMMERCIAL STRUCTURE
- ☐ 2-4 FAMILY HOUSE OR ROW HOUSE
- ☐ APARTMENT HOUSE (5-10 UNITS)
- ☐ APARTMENT HOUSE (11-20 UNITS)
- ☐ APARTMENT HOUSE (21 OR MORE UNITS)
- ☐ OTHER (DESCRIBE):_____

_____

5. IS THIS PUBLIC HOUSING?

- ☐ YES
- ☐ NO
- ☐ DON'T KNOW

THUMBNAIL SKETCH